



Rolling Log No. 09-15-34 Case Number 09A105157

Page 1 of 3 TO BE COMPLETED BY D.R.E. TRAINED PERSONNEL

Offense(s) Charged
DUID

Name (Last, First, Middle) [REDACTED] Age 24 Sex M Arresting Officer (Name/Agency) Tpr. KAMERLING / VSP-Williston

Date/Time of Arrest 12-23-09 / 1936 Breath test results .000% Time 1935 Refused Date/Time/Location of Examination 2045 / 12-23-09 / VSP Williston Barracks

Admonition of Rights given by? Tpr. KAMERLING Rights Waived? Yes No What have you eaten today? BURRITO Time? 1700 hrs What have you been drinking? NOTHING How much? - Time of last drink? -

Time Now? 8:30 pm When did you last sleep? LAST NIGHT How long? 7 hrs. Are you sick or injured? Yes No Are you diabetic or epileptic? Yes No

Do you take insulin? Yes No Do you have any physical defects? Yes No Are you under the care of a doctor/dentist? BOTH - DR. LISA OWENS Yes No

Are you taking any medication or drugs? METHADONE / DOXEPIN Yes No Do you have high blood pressure or heart disease? If yes, describe. HIGH BLOOD PRESSURE No Yes Have you ever had a severe head injury? Yes No Do you have brain damage? Yes No

Speech SLOW Altitude/Behavior COOPERATIVE Coordination POOR Face cheeks FLUSHED Breath/Odors NORMAL

Corrective Lenses Glasses Contacts Hard Soft None Normal Bloodshot Watery Blindness None Right Eye Left Eye

Pupil size Equal Unequal (explain) Able to follow stimulus? Yes No Eyelids Retracted Normal Droopy

Pulse & Time
 1. 92, 2058
 2. 80, 2119
 3. 86, 2137

HGN
 Lack of smooth pursuit
 Max. deviation
 Angle of onset Resting (0) Rapid (35) Extreme (45) Immediate (0-30) Near extreme (40) None

Right eye Yes No
 Left eye Yes No

Vertical nystagmus? Yes No
 Convergence
 Right eye Left eye

(3) One leg stand Timed 30 seconds
 Count # 15 Count # 17
 R L R L
 Stopped #14

(1) Modified Romberg

(2) Walk and turn

Cannot keep balance _____
 Started too soon _____

	1st Nine	2nd Nine
Stopped walking	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Missed heel-toe	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Stepped off line	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Raised arms	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Actual steps taken	<u>9</u>	<u>9</u>

Sways while balancing L R
 Used arms to balance L R
 Hopping L R
 Put foot down L R
 BODY TRIMORS
 Type of footwear SOCKS

Internal clock 35 Estimated as 30 sec. Describe turn TOOK MANY SMALL STEPS w/ BOTH FEET Cannot do test (explain)

(4) Finger/Nose Right Left
 Draw lines to spots touched

Pupil Size: MM

	Light	Right Eye	Left Eye
Room Light		<u>2.5</u>	<u>2.5</u>
Near Total Darkness		<u>7.5</u>	<u>7.5</u>
Direct		<u>3</u>	<u>3</u>

 Comments
 Rebound dilation Yes No
 Reaction to light Normal Slow Little or None Visible

Nasal area RED Oral cavity/Tongue White Film

INDICATE FRESH OR OLD PUNCTURE MARKS
 Attach Photos of Fresh Puncture Marks (optional)

FRONT BACK
 (R - OLD) (L - R)

Blood pressure 138/96 Temperature 97.2 °F
 Chemical test time: 2327

Muscle tone Near Normal Flaccid Rigid
 Comments Blood Refused

Drug admission? DOXEPIN unknown dose noon
METHADONE 80mg 9am.
 Witness: S/Tpr. KAMERLING

Examining Officer Tpr. RAVELIN I.D. Number 229 IACP/DRE # 15470

Agency VSP-Williston Reviewed by [Signature] DRE -- Ravelin
 Opinion of Evaluator: Alcohol Stimulant Dissociative Anesthetic Inhalant
 Medical Depressant Hallucinogen Narcotic Analgesic Cannabis

2/5/2010

[Redacted Name]

Drug recognition evaluation report/narrative

- 1: **Location:** The evaluation was conducted at the State Police Barracks in Williston in the DRE processing room.
- 2: **Witness:** The entire evaluation was witnessed by S/Tpr. Kamerling of the Vermont State Police.
- 3: **Breath Test:** [Redacted] provided a sample of his breath with a Preliminary Breath Test result of .000% BrAC at approximately 1935 hours using an Alco IV serial number 042439.

4: **Notification/Interview of A/O:** S/Tpr. Kamerling radioed me requesting a DRE after stopping a vehicle that matched the description of a Be On the Look Out (BOL) and the operator appeared impaired with something other than alcohol. S/Tpr. Kamerling stated the BOL was issued for erratic operation. The vehicle was weaving in the roadway. S/Tpr. Kamerling advised while speaking with the operator, identified by a Massachusetts photo license as [Redacted] the suspected impairment. After performing poorly on Stand Field Sobriety Exercises Parker provided a sample of his breath with a result of .000% BrAC. ^{S/Tpr}

5: **Initial Observations:** I first observed [Redacted] at the State Police Barracks in Williston. I noted his speech was slow and his movements were slow and lethargic.

6: **Medical Problems:** [Redacted] stated he was diagnosed with severe anxiety and suffered from panic attacks. He also advised he had trouble sleeping. No evidence of injury or illness was observed.

7: **Psychophysical Tests:** [Redacted] exhibited impairment through out all portions of the psychophysical tests. On the Modified Romberg [Redacted] swayed side to side approximately one inch. On the Walk and Turn, [Redacted] missed touching heel to toe on steps number two and eight on the first set of nine steps. On step eight, [Redacted] stepped of line and grabbed onto a desk to help regain balance. He turned incorrectly by turning clockwise and stepping with both feet when he was instructed to keep one foot planted. On the second set of nine steps, [Redacted] missed touching heel to toe on step number seven and stepped off line on step nine and had to use the wall to regain balance. On the One Leg Stand while standing on the left foot, [Redacted] put his foot down on six, eight, fourteen and eighteen. He used his arms for balance and swayed while balancing. [Redacted] counted to fifteen in thirty seconds. While standing on the right foot, [Redacted] skipped number fourteen and put his foot down on number sixteen. He used his arms for balance and swayed while balancing. [Redacted] counted to seventeen in thirty seconds. [Redacted] exhibited body tremors through out the exercise. On the Finger to Nose, [Redacted] failed to touch the tip of his nose with the tip of his finger on steps number one, three, and six.

Subscribed and sworn to before me on

this 29 day of December 2009

[Signature]
 (Notary Public) (Judicial Officer)

[Signature]
 (Affiant)
12-29-09
 (date)

Name (Last, First, Middle)
[REDACTED]

Violations
T 23 VSA 1201(a)(3)

Drug recognition evaluation report/narrative

8: **Clinical Indicators:** Eyes: [REDACTED] pupils were of equal size and he was able to follow a stimulus. [REDACTED] exhibited a lack of smooth pursuit, HGN at maximum deviation and onset of HGN at forty degrees or near extreme. I observed vertical nystagmus and lack of convergence. His pupil size was at the low end of normal in room light conditions. I had to advise [REDACTED] to open his eyes several times while in near total darkness. He exhibited mild ptosis. His pupil reaction to light was slow and he exhibited rebound dilation. Vital Signs: [REDACTED] blood pressure was above normal at 138/96.

9: **Signs of Ingestion:** [REDACTED] has several healed puncture marks on his left and right arms. The veins were used to the extent they were cratered and black in color.

10: **Statements:** [REDACTED] stated he was given an 80 mg dosage of Methadone at approximately 9:00 am. He stated he ingested a Doxepin at approximately noon and was not aware of the dosage. [REDACTED] also had Gabapentin in is possession. [REDACTED] advised he was not prescribed this medication and had not used it for a couple of weeks.

11: **Opinion of Evaluator:** In my opinion, [REDACTED] was under the influence of CNS Depressants and was unable to operate a motor vehicle safely.

12: **Toxicological Sample:** [REDACTED] was transported to Fletcher Allen Health Center to draw a sample of his blood. The results are pending.

13. **Miscellaneous:** I am a Nationally Certified Drug Recognition Expert since July 2008.

Subscribed and sworn to before me on

this 29 day of December 2009

M J Kearney
(Notary Public) (Judicial Officer)

[Signature]
(Affiant)
12-29-09
(date)

VERMONT DEPARTMENT OF HEALTH LABORATORY

195 COLCHESTER AVE. P.O. BOX 1125
BURLINGTON, VT 05402-1125
802-863-7335 1-800-660-9997(VT only)

Miscellaneous Toxicology Analysis Report

Laboratory No.(s), 10EB 151

Receipt Date: 12/24/09

Submitter: S/T Michael Kamerling

Sample Description: 10 ml test tube of blood

Agency: VSP Williston Barracks

from donor [REDACTED]

Case No. 09A105157

Address: 2777 St. George Rd.

Town: Williston State: VT

Analysis Requested: benzodiazepines, doxepin

Zip: 05495

Result[s] of analysis:

<u>Benzodiazepines by LC/MS</u>	<u>Result</u>	<u>Reporting Limit</u>
Clonazepam	229 ng/ml	10 ng/ml
7-aminoclonazepam	183 ng/ml	10 ng/ml

<u>Tricyclic Antidepressants by LC/MS</u>	<u>Result</u>
Doxepin	none detected

Laboratory Notes:

Clonazepam

Clonazepam is a benzodiazepine derivative that was approved in the U.S. for use as an anticonvulsant. Plasma concentrations in patients on 6mg/day chronic therapy were found to be 29-75 ng/ml for clonazepam and 23-137 ng/ml for its major active metabolite, 7-aminoclonazepam. Substantial adverse effects (primarily drowsiness and ataxia) were noticed in most patients when plasma clonazepam concentrations exceeded 100 ng/ml. *Baselt et al.*

Reporting Limit is set by VDH Lab and does not reflect levels of impairment.

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Report release: 1/15/10
Date

[Signature]
Analyst